

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|--|---|-----------------------------------|--|---|---|---|--|---|------------|---|------|-----------|-----------|----------------|--|-------------|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: <div style="text-align: center; font-size: 2em;">8</div> | | | | | | | | | | | | | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:45%; text-align: center;">FIRST</td> <td style="width:15%; text-align: center;">MI</td> </tr> <tr> <td></td> <td style="text-align: center;"><i>Mr</i> <i>Rodolfo</i></td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="text-align: center;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center;"><i>Rudy</i> <i>Morales</i></td> <td style="text-align: center;"><i>III</i></td> </tr> </table> | MS / MRS / MR | FIRST | MI | | <i>Mr</i> <i>Rodolfo</i> | | NICKNAME | LAST | SUFFIX | | <i>Rudy</i> <i>Morales</i> | <i>III</i> | <div style="text-align: center; border: 1px solid black; padding: 2px;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 2px;">Date Received</div> <div style="border: 1px solid black; padding: 2px; height: 100px; text-align: center; font-size: 2em; opacity: 0.5;">10/29/18</div> <div style="border: 1px solid black; padding: 2px;">Date Hand-delivered or Date Postmarked</div> <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table> | | Receipt # | Amount \$ | Date Processed | | Date Imaged | |
| MS / MRS / MR | FIRST | MI | | | | | | | | | | | | | | | | | | | |
| | <i>Mr</i> <i>Rodolfo</i> | | | | | | | | | | | | | | | | | | | | |
| NICKNAME | LAST | SUFFIX | | | | | | | | | | | | | | | | | | | |
| | <i>Rudy</i> <i>Morales</i> | <i>III</i> | | | | | | | | | | | | | | | | | | | |
| Receipt # | Amount \$ | | | | | | | | | | | | | | | | | | | | |
| Date Processed | | | | | | | | | | | | | | | | | | | | | |
| Date Imaged | | | | | | | | | | | | | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">ADDRESS / PO BOX;</td> <td style="width:15%; font-size: 8px;">APT / SUITE #;</td> <td style="width:15%; font-size: 8px;">CITY;</td> <td style="width:15%; font-size: 8px;">STATE;</td> <td style="width:25%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; padding: 10px;"><i>1219 Santa Maria Ave.</i></td> </tr> </table> | | | ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE | <i>1219 Santa Maria Ave.</i> | | | | | | | | | | | | |
| ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; | ZIP CODE | | | | | | | | | | | | | | | | | |
| <i>1219 Santa Maria Ave.</i> | | | | | | | | | | | | | | | | | | | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:40%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td style="text-align: center;"><i>(956)</i></td> <td style="text-align: center;"><i>206-5378</i></td> <td></td> </tr> </table> | | | AREA CODE | PHONE NUMBER | EXTENSION | <i>(956)</i> | <i>206-5378</i> | | | | | | | | | | | | | |
| AREA CODE | PHONE NUMBER | EXTENSION | | | | | | | | | | | | | | | | | | | |
| <i>(956)</i> | <i>206-5378</i> | | | | | | | | | | | | | | | | | | | | |
| 6 CAMPAIGN TREASURER NAME | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: 8px;">MS / MRS / MR</td> <td style="width:45%; text-align: center;">FIRST</td> <td style="width:15%; text-align: center;">MI</td> </tr> <tr> <td></td> <td style="text-align: center;"><i>Ms</i> <i>Maria Del Carmen</i></td> <td></td> </tr> <tr> <td style="font-size: 8px;">NICKNAME</td> <td style="text-align: center;">LAST</td> <td style="text-align: center;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center;"><i>Perez</i></td> <td></td> </tr> </table> | MS / MRS / MR | FIRST | MI | | <i>Ms</i> <i>Maria Del Carmen</i> | | NICKNAME | LAST | SUFFIX | | <i>Perez</i> | | <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table> | | Receipt # | Amount \$ | Date Processed | | Date Imaged | |
| MS / MRS / MR | FIRST | MI | | | | | | | | | | | | | | | | | | | |
| | <i>Ms</i> <i>Maria Del Carmen</i> | | | | | | | | | | | | | | | | | | | | |
| NICKNAME | LAST | SUFFIX | | | | | | | | | | | | | | | | | | | |
| | <i>Perez</i> | | | | | | | | | | | | | | | | | | | | |
| Receipt # | Amount \$ | | | | | | | | | | | | | | | | | | | | |
| Date Processed | | | | | | | | | | | | | | | | | | | | | |
| Date Imaged | | | | | | | | | | | | | | | | | | | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; font-size: 8px;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%; font-size: 8px;">APT / SUITE #;</td> <td style="width:10%; font-size: 8px;">CITY;</td> <td style="width:10%; font-size: 8px;">STATE;</td> <td style="width:30%; font-size: 8px;">ZIP CODE</td> </tr> <tr> <td colspan="5" style="text-align: center; padding: 10px;"><i>1202 Garfield St. Laredo, TX 78040</i></td> </tr> </table> | | | STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE | <i>1202 Garfield St. Laredo, TX 78040</i> | | | | | | | | | | | | |
| STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; | CITY; | STATE; | ZIP CODE | | | | | | | | | | | | | | | | | |
| <i>1202 Garfield St. Laredo, TX 78040</i> | | | | | | | | | | | | | | | | | | | | | |
| 8 CAMPAIGN TREASURER PHONE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 8px;">AREA CODE</td> <td style="width:40%; font-size: 8px;">PHONE NUMBER</td> <td style="width:40%; font-size: 8px;">EXTENSION</td> </tr> <tr> <td style="text-align: center;"><i>(956)</i></td> <td style="text-align: center;"><i>635-9892</i></td> <td></td> </tr> </table> | | | AREA CODE | PHONE NUMBER | EXTENSION | <i>(956)</i> | <i>635-9892</i> | | | | | | | | | | | | | |
| AREA CODE | PHONE NUMBER | EXTENSION | | | | | | | | | | | | | | | | | | | |
| <i>(956)</i> | <i>635-9892</i> | | | | | | | | | | | | | | | | | | | | |
| 9 REPORT TYPE | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;"><input type="checkbox"/> January 15</td> <td style="width:25%;"><input type="checkbox"/> 30th day before election</td> <td style="width:25%;"><input type="checkbox"/> Runoff</td> <td style="width:25%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table> | | | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) | <input type="checkbox"/> July 15 | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded \$500 limit | <input type="checkbox"/> Final Report (Attach C/OH - FR) | | | | | | | | | | |
| <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> July 15 | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded \$500 limit | <input type="checkbox"/> Final Report (Attach C/OH - FR) | | | | | | | | | | | | | | | | | | |
| 10 PERIOD COVERED | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;"> <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:33%;">Month</td> <td style="width:33%;">Day</td> <td style="width:33%;">Year</td> </tr> <tr> <td style="text-align: center;"><i>10</i></td> <td style="text-align: center;"><i>8</i></td> <td style="text-align: center;"><i>18</i></td> </tr> </table> </td> <td style="width:10%; text-align: center; vertical-align: middle;">THROUGH</td> <td style="width:40%; text-align: center;"> <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:33%;">Month</td> <td style="width:33%;">Day</td> <td style="width:33%;">Year</td> </tr> <tr> <td style="text-align: center;"><i>10</i></td> <td style="text-align: center;"><i>29</i></td> <td style="text-align: center;"><i>18</i></td> </tr> </table> </td> </tr> </table> | | | <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:33%;">Month</td> <td style="width:33%;">Day</td> <td style="width:33%;">Year</td> </tr> <tr> <td style="text-align: center;"><i>10</i></td> <td style="text-align: center;"><i>8</i></td> <td style="text-align: center;"><i>18</i></td> </tr> </table> | Month | Day | Year | <i>10</i> | <i>8</i> | <i>18</i> | THROUGH | <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:33%;">Month</td> <td style="width:33%;">Day</td> <td style="width:33%;">Year</td> </tr> <tr> <td style="text-align: center;"><i>10</i></td> <td style="text-align: center;"><i>29</i></td> <td style="text-align: center;"><i>18</i></td> </tr> </table> | Month | Day | Year | <i>10</i> | <i>29</i> | <i>18</i> | | | |
| <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:33%;">Month</td> <td style="width:33%;">Day</td> <td style="width:33%;">Year</td> </tr> <tr> <td style="text-align: center;"><i>10</i></td> <td style="text-align: center;"><i>8</i></td> <td style="text-align: center;"><i>18</i></td> </tr> </table> | Month | Day | Year | <i>10</i> | <i>8</i> | <i>18</i> | THROUGH | <table style="width:100%; border-collapse: collapse; font-size: 8px;"> <tr> <td style="width:33%;">Month</td> <td style="width:33%;">Day</td> <td style="width:33%;">Year</td> </tr> <tr> <td style="text-align: center;"><i>10</i></td> <td style="text-align: center;"><i>29</i></td> <td style="text-align: center;"><i>18</i></td> </tr> </table> | Month | Day | Year | <i>10</i> | <i>29</i> | <i>18</i> | | | | | | | |
| Month | Day | Year | | | | | | | | | | | | | | | | | | | |
| <i>10</i> | <i>8</i> | <i>18</i> | | | | | | | | | | | | | | | | | | | |
| Month | Day | Year | | | | | | | | | | | | | | | | | | | |
| <i>10</i> | <i>29</i> | <i>18</i> | | | | | | | | | | | | | | | | | | | |
| 11 ELECTION | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 8px;">ELECTION DATE</td> <td style="width:70%; font-size: 8px;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: 8px;">Month Day Year</td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> <tr> <td style="text-align: center; padding: 5px;"><i>11 / 6 / 18</i></td> <td></td> </tr> </table> | ELECTION DATE | ELECTION TYPE | Month Day Year | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | <i>11 / 6 / 18</i> | | | | | | | | | | | | | | | |
| ELECTION DATE | ELECTION TYPE | | | | | | | | | | | | | | | | | | | | |
| Month Day Year | <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | | | | | | | | | | | | | | | | | | | | |
| <i>11 / 6 / 18</i> | | | | | | | | | | | | | | | | | | | | | |
| 12 OFFICE | OFFICE HELD (if any) | 13 OFFICE SOUGHT (if known) | | | | | | | | | | | | | | | | | | | |
| | | <i>Municipal Court judge</i> | | | | | | | | | | | | | | | | | | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

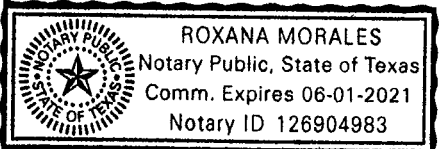
**FORM C/OH
COVER SHEET PG 2**

| | |
|--------------|--|
| 14 C/OH NAME | 15 Filer ID (Ethics Commission Filers) |
|--------------|--|

| | | | |
|---|---|-------------------|--|
| 16 NOTICE FROM POLITICAL COMMITTEE(S) | THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. | | |
| <input type="checkbox"/> Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | |
| | <input type="checkbox"/> SPECIFIC | | |
| | COMMITTEE CAMPAIGN TREASURER NAME | | |
| COMMITTEE CAMPAIGN TREASURER ADDRESS | | | |

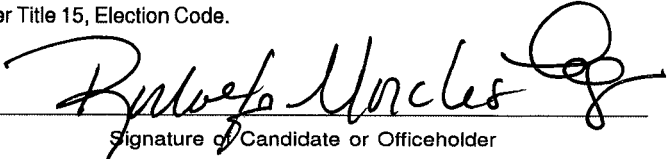
| | | |
|-------------------------|---|-----------|
| 17 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 0 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 1200 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 1590 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 249.39 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0 |

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Rodolfo Morales III, this the 29 day of October, 2018, to certify which, witness my hand and seal of office.

| | | |
|--|---|--|
| <u>Roxana Morales</u> Signature of officer administering oath | <u>Roxana Morales</u> Printed name of officer administering oath | <u>Notary</u> Title of officer administering oath |
|--|---|--|

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

| | | | |
|-----|-------------------------------------|--|---------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 500 |
| 2. | <input checked="" type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 700 |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> | SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 1590 |
| 6. | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1

2 FILER NAME

Rodolfo "Rudy" Morales III

3 Filer ID (Ethics Commission Filers)

4 Date

10/16/18

5 Full name of contributor

Nelso Molina

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City; State; Zip Code

203 Valladolid Lane, TX 78045

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: <i>1</i> | |
| 2 FILER NAME <i>Rodolfo "Budy" Morales II</i> | | 3 Filer ID (Ethics Commission Filers) | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date <i>10/21/18</i> | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sylvia Sanchez</i> | 8 Amount of Contribution \$ <i>\$700</i> | 9 In-kind contribution description <i>Event Expenses</i> |
| 7 Contributor address; City; State; Zip Code <i>218 Evans Laredo TX 78040</i> | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Retired</i> | | 11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Retired</i> | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See Instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

| | | | |
|--|---|---|----------------------------------|
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of Contribution \$ | In-kind contribution description |
| | Contributor address; City; State; Zip Code | | |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) | | Employer (FOR NON-JUDICIAL) (See Instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See Instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME <i>Rodolfo "Rudy" Morales</i> | 3 Filer ID (Ethics Commission Filers) |
| 4 Date <i>Oct 9 /18</i> | 5 Payee name <i>2417 Laredo</i> | |
| 6 Amount (\$) <i>\$ 250</i> | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <i>Advertising</i> | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | |
| Candidate / Officeholder name | Office sought | Office held |

| | | |
|-------------------------------|--|---|
| Date <i>Oct 9 /18</i> | Payee name <i>Saul Cardenas</i> | |
| Amount (\$) <i>\$ 200</i> | Payee address; City; State; Zip Code <i>2119 Camp Laredo TX 78040</i> | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) <i>Advertising</i> | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | |
| Candidate / Officeholder name | Office sought | Office held |

| | | |
|-------------------------------|--|---|
| Date <i>Oct 12 /18</i> | Payee name <i>Latin Western Enterprises</i> | |
| Amount (\$) <i>\$500</i> | Payee address; City; State; Zip Code <i>7511 McPherson Laredo TX 78040</i> | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) <i>Advertising</i> | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | |
| Candidate / Officeholder name | Office sought | Office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

| | | | |
|---|--|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME <i>Rodolfo "Rudy" Moroles III</i> | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date <i>10/13/18</i> | 5 Payee name <i>ATM</i> | | |
| 6 Amount (\$) <i>\$50.00</i> | 7 Payee address; City; State; Zip Code <i>Advertising 1702 Lane Laredo TX 78240</i> | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <i>Advertising</i> | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete ONLY if direct expenditure to benefit C/OH | | |
| Date <i>10/15/18</i> | Candidate / Officeholder name <i>24/7 Laredo</i> | | |
| Amount (\$) <i>\$250.00</i> | Payee address; City; State; Zip Code | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) <i>Advertising</i> | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | Candidate / Officeholder name <i>24/7 Laredo</i> | | |
| Date <i>10/15/18</i> | Payee name <i>Saul Cardenas</i> | | |
| Amount (\$) <i>\$300</i> | Payee address; City; State; Zip Code <i>2119 Camp Laredo, TX 78240</i> | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) <i>Advertising</i> | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | Candidate / Officeholder name <i>Saul Cardenas</i> | | |
| Complete ONLY if direct expenditure to benefit C/OH | | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|-------------------------------------|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME <i>Rodolfo "Rudy" Morales</i> | 3 Filer ID (Ethics Commission Filers) |
| 4 Date <i>10/29/18</i> | 5 Payee name <i>Rodriguez Catering</i> | |
| 6 Amount (\$) <i>\$40</i> | 7 Payee address; City; State; Zip Code <i>104 E Calton Rd. St 114 Laredo TX 78045</i> | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <i>Food Expenses</i> | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |

| | | | |
|---|-------------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

| | |
|------|------------|
| Date | Payee name |
|------|------------|

| | |
|-------------|--------------------------------------|
| Amount (\$) | Payee address; City; State; Zip Code |
|-------------|--------------------------------------|

| | | |
|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|-------------------------------|--|---|

| | | | |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

| | |
|------|------------|
| Date | Payee name |
|------|------------|

| | |
|-------------|--------------------------------------|
| Amount (\$) | Payee address; City; State; Zip Code |
|-------------|--------------------------------------|

| | | |
|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|-------------------------------|--|---|

| | | | |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED